COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My citizenship, residence and post office address are as listed below next to my name.

I believe I am the original, first and [] sole/[x] joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: Decentralized, Distributed Internet Data Management, Serial No. 09/682,969 the specification of which

(a) []	is attached h	ereto.	•			
(b) [x]	was filed on on		as Application Serial No.	09/682,969	_ and was ame	ended
(c) []	was describe amended on		rnational Application No.		filed on	and
includi informa	ng the claims, ation which is	nave reviewed and un- as amended by any a material to the patenta	edgment of Duty of Disc derstood the content of the mendment referred to aborability of the subject matte Regulations § 1.56(a).	e above ident ove. I acknow	ledge the duty	to disclose
365(c) insofar States acknow	of any PCT in as the subject or PCT internuted by the during the during the filing date.	iternational application it matter of each of the ational application in t by to disclose material	35 U.S.C. § 120 Inited States Code, § 120 In designating the United Seclaims of this application the manner provided by the Information as defined in tion and the national or Position and the national or Position and the national or Position and the national or Positional Or Positi	tates of Amer is not disclos ie first paragra 37 CFR § 1.5	ica, listed below ed in the prior aph of 35 U.S.C 3 which becam	w and, United), § 112, I e available
(Applica	ion Serial No.)	(Filing Date)	(Status)(patented,pending,at	pandoned)	(Patent No. if a	pplicable)
(Applica	tion Serial No.)	(Filing Date)	(Status)(patented,pending,al	oandoned)	(Patent No. if a	pplicable)
			Power of Attorney			
			. No. 32,746, Marina T. La of OPPEDAHL & LARSON			

Dillon, CO 80435-5068 as attorneys to prosecute this application and to transact all business in the Patent

SEND CORRESPONDENCE TO:

021121

and Trademark Office connected therewith.

PRITENT TRADEHARK OFFICE

DIRECT TELEPHONE CALLS TO: OPPEDAHL & LARSON LLP (970)468-6600 Claim for Priority

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign applications for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

SAID APPLICATION	ON		· -		
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)	PRIORITY CLAIMED	CERTIFIED COPY ATTACHED
				YES[] NO[]	YES[]NO[]
FOREIGN APPLICATI	ON(S), IF ANY, FILED MORE T	1AN 12 MONTHS (6 M	ONTHS FOR DESIGN) F	RIOR TO SAID APPLI	CATION
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)		

Provisional Application

I hereby claim the benefit under 35 U.S.	6.C § 119(e) of any	United States provisional	application(s) listed below.
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60/245,374	November 2, 2000	
(application number)	(filing date)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE	LAST NAME	FIRST NAME	MIDDLE NAME
OR FIRST INVENTOR	PARDON	GUY	
RESIDENCE &	CITY OF RESIDENCE	STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP
CITIZENSHIP	ZEMST	BE	BE
POST OFFICE ADDRESS Atomikos BVBA Spilttraat 126		crry Zemst, B-1980	STATE/COUNTRY ZIP CODE BE
DATE /	1-1-6002	SIGNATURE	ardor

- [x] Signature for additional joint inventor attached. Numer of Pages 1.
- [] Signature by Administrator(trix) or legal representative for deceased or incapacitated inventor. Number of Pages
- [] Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR § 1.47. Number of Pages ___.

NAME OF SECOND INVENTOR	LAST NAME ALONSO	FIRST NAME GUSTAVO	MIDDLE NAME	
RESIDÊNCE & CITIZENSHIP	CITY OF RESIDENCE ZURICH	STATE OR COUNTRY OF RESIDENCE CH	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS Informationssystems Zentrum CJU E1		CITY ZURICH,	STATE/COUNTRY ZIP CODE CH-8092/	
DATE X	-2-2002	SIGNATURE	odl	
NAME OF THIRD INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY OF RESIDENCE	STATE OR COUNTRY OF RÉSIDENCE	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRESS	3	СІТУ	STAYE/COUNTRY ZIP CODE	
DATE		SIGNATURE	<u> </u>	
NAME OF FOURTH INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
RESIDENCE & CITIZENSHIP	CITY OF RESIDENCE	STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP	
POST OFFICE ADDRES	s	СІТҮ	STATE/COUNTRY ZIP CODE	
DATE		SIGNATURE		
NAME OF FIFTH INVENTOR	LAST NAME	FIRST NAME	MIDDLÉ NAME	
RESIDENCE &	CITY OF RESIDENCE	STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP	
CITIZENSHIP		1	1	
POST OFFICE ADDRES	S	СПҮ	STATE/COUNTRY ZIP CODE	